

B6F (Official Form 6F) (12/07)

In re **Vahig A Kadoian,
Arpin Kerob**

Case No. **2:12-bk-40239**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx2612 Bank Of America Attention: Recovery Department 4161 Piedmont Pkwy. Greensboro, NC 27410		H	Opened 9/01/03 Last Active 9/07/10 Credit Card				10,314.00
Account No. xxxx6177 Cach, LLC Superior Court, County of Los Angeles 600 East Broadway Glendale, CA 91206		X C					12,099.12
Account No. xxxxxxxxxxxx4690 Capital One, N.a. Capital One Bank (USA) N.A. P.O. Box 30285 Salt Lake City, UT 84130		H	Opened 1/01/06 Last Active 6/11/10 Credit Card				1,133.00
Account No. xxxxxxxxxxxx5629 Chase P.O. Box 15298 Wilmington, DE 19850		H	Opened 7/01/03 Last Active 8/13/10 Credit Card				2,990.00
Subtotal (Total of this page)							26,536.12

4 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

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Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx6432 Chase P.O. Box 15298 Wilmington, DE 19850		H	Opened 12/01/04 Last Active 6/24/10 Credit Card				1,421.00
Account No. xxxxxxxxxxxx7918 Chase P.O. Box 15298 Wilmington, DE 19850		H	Opened 12/01/07 Last Active 8/11/10 Charge Account				497.00
Account No. xxxxxxxxxxxx8597 Childrens Place/Citicorp Credit Services Attn.: Centralized Bankruptcy P.O. Box 20363 Kansas City, MO 64195		H	Opened 10/01/05 Last Active 8/11/10 Charge Account				1,292.00
Account No. xxxxxxxxxxxx2708 Citibank Sd, Na Attn: Centralized Bankruptcy P.O. Box 20507 Kansas City, MO 64195		H	Opened 4/22/05 Last Active 7/06/10 Credit Card				3,921.00
Account No. xxxxxxxxxxxx5317 Citibank Sd, Na Attn: Centralized Bankruptcy P.O. Box 20507 Kansas City, MO 64195		H	Opened 10/01/06 Last Active 8/13/10 Credit Card				3,306.00
Sheet no. <u>1</u> of <u>4</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page) 10,437.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Vahig A Kadoian,
Arpin Kerob**

Case No. **2:12-bk-40239**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxx9900 Discover Fin Attention: Bankruptcy Department P.O. Box 3025 New Albany, OH 43054	H	Opened 10/04/06 Last Active 7/26/10 Credit Card				2,779.00
Account No. xxxxxxxxxxxx9220 Dsnb Macys 9111 Duke Blvd Mason, OH 45040	H	Opened 12/01/03 Last Active 7/06/10 Charge Account				3,836.00
Account No. xxxxxxxxxxxx9420 Dsnb Macys 9111 Duke Blvd Mason, OH 45040	H	Opened 12/01/05 Last Active 7/02/10 Charge Account				556.00
Account No. xxxxxxxxxxxx0232 Hsbc Bank Attn: Bankruptcy P.O. Box 5213 Carol Stream, IL 60197	H	Opened 1/05/05 Last Active 7/24/10 Credit Card				1,392.00
Account No. xxxxxxxxxxxx7477 Portfolio Rc Attn: Bankruptcy P.O. Box 41067 Norfolk, VA 23541	H	Opened 3/01/11 Factoring Company Account Ge Money Bank F.S.B.				1,013.00
Sheet no. <u>2</u> of <u>4</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						9,576.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Vahig A Kadoian,
Arpin Kerob**

Case No. **2:12-bk-40239**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxx4020 Portfolio Rc Attn: Bankruptcy P.O. Box 41067 Norfolk, VA 23541	H	Opened 9/01/11 Factoring Company Account Hsbc Bank Nevada N.A.				867.00
Account No. xxxxx3499 Target Credit Card (TC) C/O Financial & Retail Services Mailstop BT P.O. Box 9475 Minneapolis, MN 55440	H	Opened 8/01/08 Last Active 7/02/10 Credit Card				469.00
Account No. xxxxxxK397 Toyota Motor Credit Co Toyota Financial Services P.O. Box 8026 Cedar Rapids, IA 52408	C	Opened 1/01/10 Last Active 5/11/12 Lease 2010 Toyota Venza				2,125.00
Account No. xxxxxxV307 Toyota Motor Credit Co Toyota Financial Services P.O. Box 8026 Cedar Rapids, IA 52408	C	Opened 3/01/07 Last Active 12/14/09 Lease				252.00
Account No. xxxxxxxxxxxx5556 Unv/citi Attn.: Centralized Bankruptcy P.O. Box 20507 Kansas City, MO 64195	H	Opened 7/01/04 Last Active 8/13/10 Credit Card				3,714.00
Sheet no. <u>3</u> of <u>4</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						7,427.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Vahig A Kadoian,
Arpin Kerob**

Case No. **2:12-bk-40239**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx3632 Wfnnb/New York & Compa Attention: Bankruptcy P.O. Box 182685 Columbus, OH 43218	H	Opened 11/09/05 Last Active 7/24/10 Charge Account				1,308.00
Account No. 						
Account No. 						
Account No. 						
Account No. 						
Sheet no. 4 of 4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,308.00
			Total (Report on Summary of Schedules)			55,284.12

**UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA**

Filer's Name:	<u>Daniel King</u>	Atty Name (if applicable):	<u>Daniel King</u>
	<u>3435 Wilshire Blvd.</u>		
	<u>Suite 1111</u>		
Street Address:	<u>Los Angeles, CA 90010</u>	CA Bar No. (if applicable):	<u>207911</u>
Filer's Telephone No.:	<u>213-388-3887</u>	Atty Fax No. (if applicable):	<u>213-388-1744</u>
In re:	Case No. 2:12-bk-40239		
	Chapter 7		
	Vahig A Kadoian		
	Arpin Kerob		

AMENDED SCHEDULE(S) AND/OR STATEMENT(S)

A filing fee of \$30.00 is required to amend any or all of Schedules "D" through "F." An addendum mailing list is also required as an attachment if creditors are being added to the creditors list. Is/are creditor(s) being added?

☐ Yes ☐ No

Indicate below which schedule(s) and/or statement(s) is(are) being amended.

☐ A ☐ B ☐ C ☐ D ☐ E ☐ F ☐ G ☐ H ☐ I ☐ J
☐ Statement of Social Security Number(s) ☐ Statement of Financial Affairs
☐ Statement of Intention ☐ Other

NOTE: IT IS THE RESPONSIBILITY OF THE DEBTOR TO MAIL COPIES OF ALL AMENDMENTS TO THE TRUSTEE AND TO NOTICE ALL CREDITORS LISTED IN THE AMENDED SCHEDULE(S) AND TO COMPLETE AND FILE WITH THE COURT THE PROOF OF SERVICE ATTACHED.

I/We, **Vahig A Kadoian and Arpin Kerob**, the person(s) who subscribed to the foregoing Amended Schedule(s) and/or Statement(s) do hereby declare under penalty of perjury that the foregoing is true and correct.

****FOR COURT USE ONLY****

DATED: November 30, 2012

/s/ Vahig A Kadoian

Vahig A Kadoian
Debtor Signature

/s/ Arpin Kerob

Arpin Kerob
Co-Debtor Signature

****SEE PROOF OF SERVICE****

PROOF OF SERVICE

I hereby certify that a copy of the Amendment(s) was(were) mailed to the Trustee and that notice was given to the additional creditors listed.

DATED: **November 30, 2012**

Daniel King

Print or Type Name

/s/ Daniel King

Signature

(SEE ATTACHED MAILING LIST.)

Cach, LLC
Superior Court, County of Los Angeles
600 East Broadway
Glendale, CA 91206

Attorney or Party Name, Address, Telephone & FAX Numbers, and California State Bar Number Daniel King Genesis Law Group, PLC 3435 Wilshire Blvd. Suite 1111 Los Angeles, CA 90010 213-388-3887 Fax: 213-388-1744 207911 <input checked="" type="checkbox"/> Attorney for Debtors	FOR COURT USE ONLY
UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA	
In re: Vahig A Kadoian Arpin Kerob Debtor(s).	CASE NO.: CHAPTER: 7 ADV. NO.:

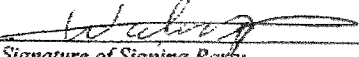
**ELECTRONIC FILING DECLARATION
(INDIVIDUAL)**

PART I - DECLARATION OF DEBTOR(S) OR OTHER PARTY

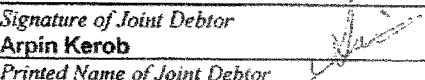
- ☒ Petition, statement of affairs, schedules or lists
☒ Amendments to the petition, statement of affairs, schedules or lists
☐ Other: _____

Date Filed: 11/30/12
 Date Filed: _____
 Date Filed: _____

I (We), the undersigned Debtor(s) or other party on whose behalf the above-referenced document is being filed (Signing Party), hereby declare under penalty of perjury that: (1) I have read and understand the above-referenced document being filed electronically (Filed Document); (2) the information provided in the Filed Document is true, correct and complete; (3) the "/s/" followed by my name, on the signature line(s) for the Signing Party in the Filed Document serves as my signature and denotes the making of such declarations, requests, statements, verifications and certifications to the same extent and effect as my actual signature on such signature line(s); (4) I have actually signed a true and correct hard copy of the Filed Document in such places and provided the executed hard copy of the Filed Document to my attorney; and (5) I have authorized my attorney to file the electronic version of the Filed Document and this Declaration with the United States Bankruptcy Court for the Central District of California. If the Filed Document is a petition, I further declare under penalty of perjury that I have completed and signed a Statement of Social Security Number(s) (Form B21) and provided the executed original to my attorney.


 Signature of Signing Party
Vahig A Kadoian
 Printed Name of Signing Party

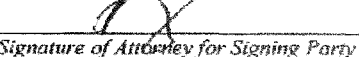
Date 11/4/12


 Signature of Joint Debtor
Arpin Kerob
 Printed Name of Joint Debtor

Date 11/4/12

PART II - DECLARATION OF ATTORNEY FOR SIGNING PARTY

I, the undersigned Attorney for the Signing Party, hereby declare under penalty of perjury that: (1) the "/s/" followed by my name, on the signature lines for the Attorney for the Signing Party in the Filed Document serves as my signature and denotes the making of such declarations, requests, statements, verifications and certifications to the same extent and effect as my actual signature on such signature lines; (2) the Signing Party signed the Declaration of Debtor(s) or Other Party before I electronically submitted the Filed Document for filing with the United States Bankruptcy Court for the Central District of California; (3) I have actually signed a true and correct hard copy of the Filed Document in the locations that are indicated by "/s/" followed by my name, and have obtained the signature(s) of the Signing Party in the locations that are indicated by "/s/" followed by the Signing Party's name, on the true and correct hard copy of the Filed Document; (4) I shall maintain the executed originals of this Declaration, the Declaration of Debtor(s) or Other Party, and the Filed Document for a period of five years after the closing of the case in which they are filed; and (5) I shall make the executed originals of this Declaration, the Declaration of Debtor(s) or Other Party, and the Filed Document available for review upon request of the Court or other parties. If the Filed Document is a petition, I further declare under penalty of perjury that: (1) the Signing Party completed and signed the Statement of Social Security Number(s) (Form B21) before I electronically submitted the Filed Document for filing with the United States Bankruptcy Court for the Central District of California; (2) I shall maintain the executed original of the Statement of Social Security Number(s) (Form B21) for a period of five years after the closing of the case in which they are filed; and (3) I shall make the executed original of the Statement of Social Security Number(s) (Form B21) available for review upon request of the Court.


 Signature of Attorney for Signing Party
Daniel King
 Printed Name of Attorney for Signing Party

Date 11/30/12